Health Watch: Oh, my aching back!

By Lt. Heather Agustines

Abraham Lincoln Physical Therapist

Back pain is the second most common reason for visiting a doctor, with about 80 percent of Americans experiencing low back pain at some point in their lives.

Despite these somewhat overwhelming odds, the majority of low back pain episodes have been shown to be self-limiting within the first 10 to 14 days. So, what do you do when you have it?

A study done by the U.S. Department of Public Health Service's Agency for Health Care Policy and Research, along with the National Institute for Health (NIH), announced a startling "less is more" approach. They recommend against most traditional forms of evaluation and treatment.

In their review of more than 10,000 research studies in low back pain, they found multitudes of drugs, devices, and other forms of pain-relieving modalities had no scientific benefit.

Surprisingly, expensive diagnostic techniques like X-rays, CT scans, and MRI's were also NOT recommended for patients with low back pain. More specifically, studies have shown that up to 63 percent of people receiving an MRI who don't have back pain will have abnormal findings.

Rarely does low back pain need to leave you feeling out of control. By learning more about your back, how it works, why it hurts and how to break the pain, you can manage the pain cycle for life. Here are some quick tips:

First, keep moving. Bed rest has been proven to worsen low back pain, by making muscles stiff and sore due to lack of movement. There is a saying that "motion is lotion," one which our body lives by. Movement, albeit somewhat limited when you're in pain, promotes blood flow to the injured site, and helps you stay "loosened up," not only helping you to feel better, but also aiding in the healing process.

You can safely stretch strained muscles by lying on your back and gently bringing your knees to your chest, holding this position for 30 seconds. This should be two to three times a day after an initial strain. Stretching throughout the day can be achieved best in a seated position by resting your chest on your thighs for 30 seconds.

You can further focus your stretch to one side or the other by lying most of your chest on one thigh or the other. Remember that you are gently stretching a sore area, so it's normal to have some discomfort—as your flexibility returns, you'll be able to move further with less discomfort. By stretching frequently throughout the day (i.e. every hour), you can greatly speed up your recovery and level of comfort.

A regular non-impact, aerobic exercise regimen—swimming, walking, biking, or whatever else suits your style and does not cause your back to hurt—is of utmost importance.

Exercise has been shown to be an effective stress and weight reducer, both of which are common enemies to people experiencing low back pain. Exercise also promotes blood circulation to stiff and sore areas, improving flexibility and comfort. A good goal for beginners is 20 to 30 minutes three times a week, but it is important to start out sensibly and within your tolerance.

Having strong stomach muscles is key, as they are responsible for assisting your back muscles in stabilizing your low back through daily activities. Traditional sit-ups usually aren't recommended if you're having back pain, so it's safest to stick with crunches and reverse (lower abdominal) crunches.

Exercises that include both of your legs in the air at the same time are the hardest for your stomach muscles to control and can lead to back pain if done incorrectly.

Maintaining good posture and body mechanics, even if you spend most of your day behind a desk, can help reduce low back pain. Using a rolled up towel in the small of your back will help with long periods of sitting.

If you tend to stand for a good portion of your day, resting one foot on a footstool may be helpful. But remember that whether you sit or stand for most of your day, the most important thing is to keep movinga n d stretching, to avoid pain and stiffness.

Non-Steroidal Anti-Inflammatory
Drugs (NSAID, i.e. Motrin) and
Tylenol are both good first line of
defense medications. The medical
department carries both of these
in the over-the-counter medication
program.

Obviously, there is no perfect drug that will cure your low back p a i n but, when taken properly, these medications can help you get out of bed, go to work, and continue your exercise program. All of which will help you feel better!